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PECOPD Do							Application or Docket Number 10550519		Filing Date: 09/23/2005				To be Mailed	
APPLICATION AS FILED – PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY														
FOR			NUMBER	NUMBER FILED NU		JMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)		FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A	\	N/A			N/A			N/A			
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A	\		
(37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A			N/A	`		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			X \$25 =		OR	X \$50 =	=		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			-	minus 3 =	•			X \$100 =			X \$200	=		
	PPLICATION SIZE 7 CFR 1.16(s))	FEE 1	100 sheets (fee due is \$2 for each add	cation and d of paper, the 250 (\$125 fo ditional 50 sh 35 U.S.C. 4 5(s).	ize) on									
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								+ \$180		+\$360		60		
* If the difference in column 1 is less than zero, enter "0" in column 2.							•	TOTAL		TOTAL		۸L		
APPLICATION AS AMENDED PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY OR				OTHER THAN SMALL ENTITY		
AMENDMENT A	09/23/05	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUS PAID FOR	PRESE			RATE (\$)	ADDITIONAL FEE (\$)		RATE	(\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 50	Minus	** 50	= 0			X \$25 =		OR	X \$50=	=	0	
	Independent (37 CFR 1.16(h))	· 3	Minus	 3	= 0	= 0		X \$100 =		OR	X \$200)=	0	
	Application Size Fee (37 CFR 1.16(s))													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1))	(Column 2	(Column	າ 3)								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESE			RATE (\$)	ADDITIONAL FEE (\$)		RATE	(\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	•	Minus	**	=			X \$25 =		OR	X \$50	=		
	Independent (37 CFR 1.16(h))	*	Minus	**	=			X \$100 =		OR	X \$200)=		
	Application Size Fee (37 CFR 1.16(s))													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
CALCULATE							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
** If th *** If t	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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